

Substitute for form 1449/PTO		Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>		Application Number	09/827,833	
		Filing Date	April 6, 2001	
		First Named Inventor	HIGH, ET AL.	
		Group Art Unit		
		Examiner Name		
Sheet		of	Attorney Docket Number	P05127US0

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Examiner Initials *	Cite No. ¹	U.S. Patent Document NUMBER Kind Code ² (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	<i>Yogeshwar Agel</i>	Date Considered	07/12/04
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*EXAMINER: Initial if reference considered whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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